

#7
AS
12/18/02
OFFICIAL

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

PATENT APPLICATION.

Applicant: Parikh et al.

Case: 5865/CALB/COPPER

Serial No.: 09/939,073

Filed: August 24, 2001

Group Art Unit: 1741

Examiner: Edna Wong

Title: METHOD AND APPARATUS FOR PROVIDING INTRA-TOOL
MONITORING AND CONTROLCOMMISSIONER FOR PATENTS
Washington, D. C. 20231

SIR:

RESPONSE TO RESTRICTION REQUIREMENT

In response to the Office Action dated November 19, 2002 (Paper No. 6) which imposed a restriction requirement in the above-captioned patent application, the Applicants hereby elect Group I (Claims 1-15) drawn to a method of monitoring and controlling manufacturing processes, classified in class 205, subclass 84. Additionally, Applicants reserve the right to subsequently file divisional applications in order to prosecute the inventions recited in any one or more of the non-elected claims.

FAX RECEIVED
DEC 19 2002
GROUP 1700

Respectfully,

12/18/02
Moser, Patterson and Sheridan, LLP
595 Shrewsbury Avenue
First Floor
Shrewsbury, N. J. 07702

Robert P. Hoag
Robert P. Hoag
Reg. No. 39,712
(732) 530-9404

Response to Restriction Requirement
Serial No. 09/939,073
Page 2

Please continue to send all correspondence to:

Patent Counsel
Applied Materials, Inc.
P. O. Box 450A
Santa Clara, CA 95052

CERTIFICATE OF FACSIMILE TRANSMISSION under 37 C.F.R. § 1.8

I certify that this correspondence is being transmitted by facsimile under 37 C.F.R. 1.8 on December 18, 2002 and is addressed to the Commissioner for Patents, Washington, D.C. 20231, Facsimile Number: 703-872-9310.

Carol Wilson
Signature

12/18/02
Date of Signature

OFFICIAL

FAX RECEIVED
DEC 19 2002
GROUP 1700

TELEFAX COVER SHEET

MOSER, PATTERSON & SHERIDAN, LLP

ATTORNEYS AT LAW

595 SHREWSBURY AVENUE

FIRST FLOOR

SHREWSBURY, NJ 07702

TELEPHONE (732) 530-9404

TELEFAX (732) 530-9808

OFFICIAL

THIS TELEFAX MESSAGE IS ADDRESSED TO THE PERSON OR COMPANY LISTED BELOW.
 IF IT WAS SENT OR RECEIVED INCORRECTLY, OR YOU ARE NOT THE INTENDED
 RECIPIENT, PLEASE TAKE NOTICE THAT THIS MESSAGE MAY CONTAIN PRIVILEGED OR
 CONFIDENTIAL MATERIAL, AND YOUR DUE REGARD FOR THIS INFORMATION IS
 NECESSARY. YOU MAY ARRANGE TO RETURN THIS MATERIAL BY CALLING THE FIRM
 LISTED ABOVE AT (732) 530-9404

THIS MESSAGE HAS 5 PAGES INCLUDING THIS SHEET

TO: Commissioner of Patents*FAX RECEIVED*FAX NO.: 703-872-9310*DEC 19 2002*FROM: Robert P. Hoag*GROUP 1700*DATE: December 18, 2002MATTER: Serial No. 09/939,073 Filed: August 24, 2001DOCKET NO.: 5865/CALB/COPPERAPPLICANT: Parikh et al.

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

- Petition
- Disclosure Statement & PTO-1449
- Priority Document
- Drawings (sheets) informal
- Response to Restriction Requirement - 2 pages

- Transmittal Letter (2 copies)
- Fee Transmittal (2 copies)
- Deposit Account Transaction
- Facsimile Transmission Certificate dated December 18, 2002

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being transmitted by facsimile to the Commissioner for Patents, Washington, DC 20231 on December 18, 2002, Facsimile No. 703-872-9310.

Carol Wilson

Name of person signing this certificate

Signature and date

Carol Wilson 12/18/02

Please type a plus sign (+) inside this box —>

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

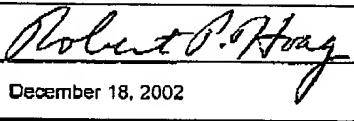
Total Number of Pages in This Submission

| | |
|--|--|
| Application Number | 09/939,073 |
| Filing Date | 8/24/01 |
| First Named Inventor | Parikh |
| Group Art Unit | 1741 |
| Examiner Name | Edna Wong |
| Total Number of Pages in This Submission | Attorney Docket Number 5865/CALB/COPPER |

ENCLOSURES (check all that apply)

| | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers <i>(for an Application)</i> | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Response to Restriction Requirement – 2 pages | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notices, Brif. Reply Brief)</i> |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | It is believed no fee is due. However, in the event a fee is due, kindly charge that fee to deposit account number 20-0782. To facilitate that charge, a duplicate copy of this letter is enclosed. |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Robert P. Hoag MOSER, PATTERSON & SHERIDAN, LLP |
| Signature |  |
| Date | December 18, 2002 |

OFFICIAL

FAX RECEIVED
 DEC 19 2002
GROUP 1700

Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

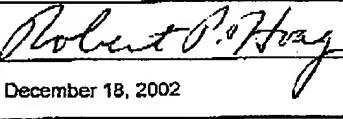
Total Number of Pages in This Submission

| | |
|------------------------|------------------|
| Application Number | 09/939,073 |
| Filing Date | 8/24/01 |
| First Named Inventor | Parikh |
| Group Art Unit | 1741 |
| Examiner Name | Edna Wong |
| Attorney Docket Number | 5865/CALB/COPPER |

ENCLOSURES (check all that apply)

| | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers <i>(for an Application)</i> | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Response to Restriction Requirement – 2 pages | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | It is believed no fee is due. However, in the event a fee is due, kindly charge that fee to deposit account number 20-0782. To facilitate that charge, a duplicate copy of this letter is enclosed. |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Robert P. Hoag MOSER, PATTERSON & SHERIDAN, LLP |
| Signature |  |
| Date | December 18, 2002 |

OFFICIAL

FAX RECEIVED
DEC 19 2002
GROUP 1700